

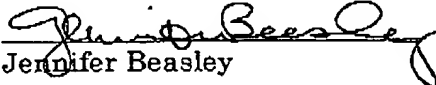
MAY 08 2006

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Margaret Anderson
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FACSIMILE COVER SHEET

TO: US Patent and Trademark Office FAX: 571 273 8300 Attn: Commissioner for Patents ART UNIT : 2876 Examiner: FRECH, Karl D. From: Pehr Jansson Reg. No. 35,759	Certificate of Transmission under 37 CFR 1.8 I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office (Fax No.: 571 273 8300) on <u>May 8, 2006.</u>  Jennifer Beasley
<u>In regard to:</u> Appl. No. : 09/945,123 Conf. No. : 2131 Applicant : Leydier, Robert Filing Date : 08/31/2001 Docket No. : 40.0048 Customer No. : 41754	This certificate applies to the following documents transmitted herewith: <ul style="list-style-type: none"> • Certificate of Transmission/Cover Sheet (this page) • Transmittal Letter SB-21 (1 page) • Petition for Ext. of Time SB-22 & Copy (2 pages) • Notice of Appeal & copy (2 pages) • Fee Transmittal SB/17 & copy (2 pages) • Credit Card Form 2038 & copy (2 pages)
Total number of pages including this cover page	-- 10 --

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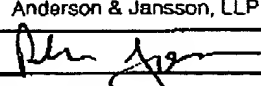
PTO/SB/21 (09-04)

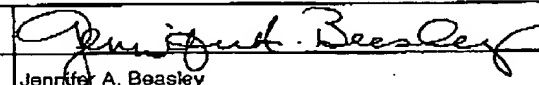
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/945,123
	Filing Date	08/31/2001
	First Named Inventor	LEYDIER, Robert A.
	Art Unit	2131
	Examiner Name	JACKSON, Jenise E.
	Attorney Docket Number	40.0048
Total Number of Pages in This Submission		10

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Credit Card Form 2038 & copy (2 pages)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Anderson & Jansson, LLP		
Signature			
Printed name	Pehr Jansson		
Date	May 8, 2006	Reg. No.	35,759

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Signature	
Typed or printed name	Jennifer A. Beasley
Date	May 8, 2006

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PTO/SB/17 (12-04v2)

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 950.00
Complete If Known

Application Number 09/045,123
 Filing Date 08/31/2001
 First Named Inventor LEYDIER, Robert A.
 Examiner Name JACKSON, Jenise E.
 Art Unit 2131
 Attorney Docket No. 40.0048

METHOD OF PAYMENT (check all that apply)
☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☐ Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)
 Each independent claim over 3 (including Reissues)
 Multiple dependent claims

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**

- 100 = / 50 = (round up to a whole number) x = **Fees Paid (\$)**

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Notice of Appeal Fee and 2 mo. Ext of time fee 850.00

SUBMITTED BYSignature Registration No. 35,759
(Attorney/Agent)

Telephone 512 372 8440

Name (Print/Type) Pehr Jansson

Date May 8, 2006

This collection of information is required by 37 CFR 1.135. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time may vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)	950.00
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Complete if Known	
Application Number	09/845,123
Filing Date	08/31/2001
First Named Inventor	LEYDIER, Robert A.
Examiner Name	JACKSON, Jenise E.
Art Unit	2131
Attorney Docket No.	40.0048

METHOD OF PAYMENT (check all that apply)

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☐ Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

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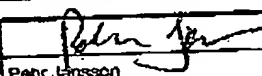
FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES		
Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Multiple Dependent Claims		
Total Claims	Extra Claims	Fee Paid (\$)
- 20 or HP = _____ x _____ = _____		
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims	Extra Claims	Fee Paid (\$)
- 3 or HP = _____ x _____ = _____		
HP = highest number of independent claims paid for, if greater than 3.		

3. APPLICATION SIZE FEE		
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).		
Total Sheets	Extra Sheets	Fee Paid (\$)
- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____		

4. OTHER FEE(S)	
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): Notice of Appeal Fee and 2 mo. Ext. of time fee	950.00

SUBMITTED BY	Registration No. 35,759	Telephone 512 372 8440
Signature 	(Attorney/Agent)	Date May 8, 2006
Name (Print/Type) Pehr Jansson		

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